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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE SACYR INFRASTRUCTURE USA LLC		SECRETARY TALLAHA
Certificate of Status	0	SSEE
Certified Copy	0	
Page Count	02	
Estimated Charge	\$25.00	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compar-	iy.
submits the following statement in order to change its registered office or registered agent, or both, in the State of	òſ
Florida.	

1. Name of the limited liability company: Sacyr Infrastructure USA LLC

2. (a) 7901 4th St N STE 300

Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)

St. Petersburg FL 33702

06/18/2015

M15000004810

3. Date of filing/registration in Florida

Document number

(b) 7901 4th St N STE 300

St. Petersburg FL 33702

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

020 JUN 24

5. (a) C T CORPORATION SYSTEM

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1200 SOUTH PINE ISLAND ROAD

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

PLANTATION

_{FL}33324

4.

, Northwest Registered Agent LLC

Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>:

7901 4th St N

NEW Registered Office Address:

STE 300

St. Petersburg

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

~ on

Morgan Noble

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Glover - Assistant Secretary

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00